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Vaccine Adverse Event Reporting System
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Jessica Rose Breaks Down Female Reproductive Adverse-Event Data

/ en Español

Background and Public Health Importance

Established in 1990, the Vaccine Adverse Event Reporting

by Sharon Rondeau

(Jan. 9, 2022) — Jessica Rose, PhD, a Canadian scientist and researcher who describes herself tersely as “[a dissident](#),” has analyzed [VAERS](#) data concerning adverse events on the [female reproductive system](#) reported to have resulted from the COVID-19 vaccines.

The “injectable products,” as Rose terms them, were approved between late 2020 and early 2021 under Emergency Use Authorizations (EUA) from the U.S. Food and Drug Administration (FDA). Produced by Pfizer, Moderna and Johnson & Johnson, respectively, the U.S.-made “vaccines” and several others produced elsewhere have collectively been administered to over [nine billion people](#) around the world as of January 8, 2022.

“VAERS” stands for “Vaccine Adverse Event Reporting System,” which is open to [anyone](#) wishing to file a report of an adverse reaction believed to be related to a vaccine. The system accommodates domestic, territorial and foreign reports involving U.S.-manufactured vaccine products.

Federal law [requires](#) all medical providers to file VAERS reports for:

- Any adverse event listed in the [VAERS Table of Reportable Events Following Vaccination](#) that occurs within the specified time period after vaccinations
- An adverse event listed by the vaccine manufacturer as a contraindication to further doses of the vaccine

A prolific writer on [Substack](#), Rose has been issuing daily reports gleaned from VAERS entries focusing on various body systems, having covered the [ears](#) on Saturday and on Friday, reported adverse events to the [eyes](#) and visual system.

In October Rose co-authored a [paper](#) with Dr. Peter A. McCullough, MD, MPH, which was “[withdrawn](#)” by the [publisher](#) without explanation and, as Rose reported later, with a request for the authors to submit a correction which they never reported to be necessary.

While anyone may file a VAERS report, according to McCullough, the Centers for Disease Control and Prevention (CDC) assigns investigators to contact the author of each report to verify it and that he has received numerous such follow-up calls.

Each report requires approximately 30 minutes to complete, and the filing of a false report is considered a felony.

McCullough indicated he and Rose might [file suit](#) over the withdrawn paper, which is titled, “A Report on Myocarditis Adverse Events in the U.S. Vaccine Adverse Events Reporting System (VAERS) in Association with COVID-19 Injectable Biological Products.”

“Vaccine manufacturers are required to report to VAERS all adverse events that come to their attention,” VAERS states on its home page, and “Online reporting is strongly encouraged. Please report clinically important adverse events that occur after vaccination of adults and children, even if you are not sure whether the vaccine caused the adverse event.”

In her Sunday post, Rose wrote that a majority (63%) of the adverse events entered in VAERS involving the female reproductive system were reported “within the first 24 hours” of their occurrence.

Rose’s graph depicting “normalized data” from the CDC shows the highest percentage of adverse events resulting from “Dose 1” of an injectable COVID-19 product in the age group “0-5.”

“The reason for the excessive proportion of events reported in 0-5 year olds comes about due to the small denominator – ‘only’ 11,791 babies aged 0-5 have been injected so far in the States,” Rose [explains](#). “Of the 10 babies aged 0-5 in VAERS, 9 are in the Foreign data set (aka: the hiding place)...”

COVID-19 vaccination is not yet approved on any level for the age group, although clinical trials are [taking place](#), Pfizer reports, with results expected in April.

According to a number of [reports](#), coronavirus poses a [low degree](#) of risk to [children](#) and healthy young adults.

Shockingly, Rose relates, the data shows that two infants in the group were said to have experienced “Vaginal haemorrhage,” and seven of the ten about whom reports were entered died from the adverse event within 22 days or less.

Not all deaths were reported as the subject having “died,” Rose noted, but received an “N” under the column, “RECOVD,” meaning “recovered.”

“I must pause... need a walk,” Rose wrote after relating the statistics. Concluding her post with strong vernacular language, she cautioned women to “please consider waiting” to take a COVID-19 vaccine. “There is nothing wrong with taking time to assess a complex situation,” she opined. “In fact, it is quite intelligent and self-responsible to do so.”

TAGGED: COVID-19 vaccines, Female reproductive system, Jessica Rose PhD, VERS

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Bill

Wednesday, January 12, 2022 at 11:28 AM

There are not 9 billion people on the planet. 9 billion doses administered is a completely different concept than 9 billion people injected.

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Nikita's_UN_Shoe

Monday, January 10, 2022 at 10:18 AM

COVID-19 injections are not unlike the injection of ineligible Article II persons into our Constitutional Republic that cause irreparable havoc and damage to all US citizens and its nation, all-the-while blurring the lines of Article II eligibility of these criminals who are ‘spiking’ the natural born

Citizenship specification as needed to meet their GLOBAL RESET goal.

One kills the human; one kills the politic.

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